

SYRINGE SERVICE PROGRAMS IN NORTH DAKOTA

REQUIREMENTS AND BEST PRACTICES

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ND DEPT. OF HEALTH DIVISION OF DISEASE CONTROL
ND HIV.STD.TB.VIRAL HEPATITIS SYMPOSIUM
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What is an SSP? A community-based program that provides key pathway to services to prevent drug use, HIV, and viral hepatitis



Free sterile needles
and syringes



Safe disposal of
needles and syringes



Referral to mental
health services



Overdose treatment
and education



Hepatitis A and B
vaccination



Other tools to prevent
HIV and hepatitis,
including counseling,
condoms, and PrEP
(a medicine to
prevent HIV)



Referral to substance use
disorder treatment, including
medication-assisted treatment



HIV and hepatitis testing
and linkage to treatment

SSPS IN ND: AUTHORIZATION

- ❖ Senate Bill 2320

- ❖ North Dakota Century Code

- ❖ 19-03.4-02: Drug Paraphernalia

- ❖ 23-01-44: SSP Authorization

- ❖ In 2019: Senate Bill 2198

- ❖ State Health Department is given Authority to Authorizes Qualified Agency to Operate a Program

- ❖ **Effective: August 1, 2017**

- ❖ No State General Funds Allocated for SSPs



**North Dakota Department of Health
Syringe Service Program
Requirements & Guidance**

Revised June 2019



SSP GUIDANCE & REQUIREMENTS FOR AUTHORIZATION

- Guide outlines the requirements put forth by ND Law of what SSP programs must do
- Guidance on the evidence based methods to meet those requirements.
 - **Every SSP will look different based on local need and comfort of stakeholders.**
 - Not a prescription for program contents.
- Guidance will evolve overtime to provide clarity and additional resources as they become available.

QUALIFIED ENTITY

Type of Entity

- Local Health Department
- City Government (program operational within the boundary of the city only)
- Organization with approval from city or county officials

Letters of Support

- Organizations that are not Local Health Departments or City Governments must provide letters of support from local officials for the operation of the SSP within a defined boundary.
- City/County Government
- Law Enforcement Entities

Medical Supervisor Identified for SSP

- The SSP must be developed and maintained under the supervision of pharmacist, physician or advance practice registered nurse who is licensed in the state to provide oversight and consultation to the program.



WHAT DOES A SSP NEED TO SUBMIT?

- Letter Addressed to State Health Officer
- Administrative Documents
 - Entity Overview
 - Community Support
 - Public Hearing
 - Financial Sustainability Statement
- Determination of Need
- Policies and Procedures Plan
- Evaluation Plan

Note: Draft Update to ND SSP Guidance, June 2019

LETTER TO STATE HEALTH OFFICER



ADMINISTRATIVE DOCUMENTS

- **Entity Overview**

- Agency Information: Description, Mission, Services Delivered, Populations to be Served, Governing Bodies, Primary Contact, Medical Supervisor

- **Community Support**

- Community Readiness and Support

- **Public Hearing**

- Occurs after Program Policy and Procedures Complete

- **Financial Sustainability Statement**

- Financial Plan



DETERMINATION OF NEED

- Is your area experiencing an increase or at risk of an increase of viral hepatitis or HIV?

POLICIES AND PROCEDURES PLAN

- Eligibility Criteria for Participants
- Location
- Transaction Model
- Participant Documentation
- Disposal
- Medical Services
- Staff Training
- Staff Safety





Electronic Disease Surveillance System Terms and Conditions of Use.

If you do not agree to be bound by the terms and conditions, promptly exit this application.

termsOfUse

The Electronic Disease Surveillance System and related services are provided subject to your compliance with the terms and conditions set forth below. Please read the following information carefully. If you do not agree to be bound by the terms and conditions, promptly exit this application.

This AGREEMENT is entered into by and between the State of North Dakota, Department of Health ("NDDoH") and you, the "User" of the Department's Electronic Disease Surveillance System (ND EDSS).

1.Applicability: This Agreement states certain terms that apply to

Your session has expired. Please login again.

Login

Username:

Password:

Application:

Login

DATA ENTRY TOOL

- Tracking Participants Over Time
- Information from NDDoH Forms – Modifiable Per Site
- Reports – Coming Soon

EVALUATION PLAN

- Short and Long Term Objectives
- Ex. By December 31, 2020, the SSP will serve 100 individuals.



KEY PERFORMANCE INDICATOR





REVIEW AND AUTHORIZATION

- Plans are to be submitted to disease@nd.gov.
- Review: 10 business days.
- Provide a determination: Authorized, Revisions Required, Denied.
- Authorized for 1 Year



North Dakota Syringe Service Program Biannual Report

Biannual Report

July 1, 2018 – December 31, 2018

Programs in North Dakota

As of December 31, 2018, there are three authorized programs operating in North Dakota.

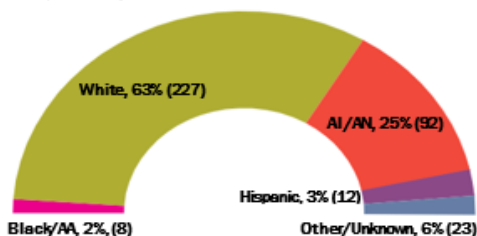
- Mandan Good Neighbor Project
Operated by Custer Health, Mandan
- Harm Reduction Center
Operated by Fargo Cass Public Health, Fargo
- Minot Good Neighbor Project
Operated by First District Health Unit, Minot]

- **350** individuals were served in total by both programs in the reporting period.
- This is a **197%** increase from the previous reporting period.

Demographic Information

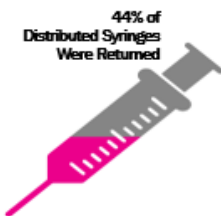
Of the 350 individuals that received services, they were from **10** known counties. Those counties include Barnes, Burleigh, Cass, Grand Forks, McKenzie, Morton, Ransom, Stutsman, Sioux and Ward. There were eight clients who declined to share their county of residence and sixty-five clients from Minnesota.

55% of persons served identified as male and **40%** identified as female. The remaining **5%** either are unknown or identify as another gender. Below is a chart that shows the breakdown of self-reported race/ethnicity.



Services Information

- There were **85** individuals who received testing services (HIV, hepatitis C or STDs).
- Harm reduction education was provided to 323 individuals, and 3,734 condoms were distributed.



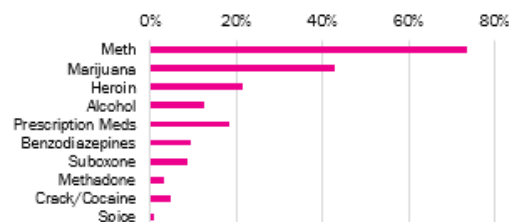
- **35** clients requested and received referral to substance abuse treatment services.

During the reporting period, there were **48,612** syringes distributed and approximately **21,417** collected. The number of syringes collected could be underreported. An actual count of syringes does not take place, rather

they are estimated by the participants and workers by weight or sight within a biohazard container. SSP workers are instructed to not handle syringes or to dig within biohazard containers as this is when an accidental needlestick could occur.

Information collected on the substances reported by participants in the 30 days prior to enrollment at the SSP are described below. Prescription meds, suboxone and methadone responses indicated that these substances were used not as prescribed. Meth was the primary substance reported with **74%** of participants indicating use.

Naloxone is available for distribution at both SSP locations. **549** doses of naloxone were distributed to participants to use when needed to help save the life of a person experiencing overdose due to opioid use.



REPORTING

- Reports January 15 and July 15 each year for the previous six month time period. Reports must be sent to disease@nd.gov.
- Information to be reported semi-annually includes:
 - Number of unique participants served
 - Non-identifying demographic information of participants (gender, race, ethnicity, county of residence, substances used, etc.) if collected
 - Approximate number of syringes collected
 - Number of syringes distributed
 - Number of individuals offered or referred to services for:
 - HIV, STD and Viral Hepatitis Testing
 - Addiction Treatment Services
 - Number of doses of naloxone distributed
 - Number of condoms distributed



For more information, call 800.472.2180 or visit
www.ndhealth.gov/HIV/SSP. 1/15/2019



SSP PROGRAM CONTACTS

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WHERE TO GO FOR MORE INFO?

www.ndhealth.gov/STD

www.itsyoursexlife.com

www.cdc.gov/STD/

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